

# ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☒ Ms.

☐ yes

☒ no

☐ Mr. Artist

Anne Celeste Owens

Permanent

Address

1252 Giel Ave. Lakewood

(Last Name Last)

44107

Street

Tel. (216)

226-0012

City

Zip

Area Code

Temporary or

Studio Address

same

Street

City

Tel. ( )

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, in which county were you born? \_\_\_\_\_

Collaborator \_\_\_\_\_

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist at artist's expense to this address: \_\_\_\_\_

## Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

Anne Celeste Owens

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 1, 1984.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Anne Celeste Owens

DO NOT DETACH

DO NOT DETACH

# ENTRY BLANKS

1

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography  
☐ 4. Sculpture ☐ 5. Crafts

Materials

Ink wash + charcoal

Shp 5 dr

Title

Afternoon

Price or NFS

NFS

Insurance Value  
If NFS Only

5150

Size

15" x 17 1/2"

## GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.  
For Sale

Total No. in Edition

Price  
Unframed

Price of  
Frame

ACCEPTED

X

DO NOT WRITE IN THIS SECTION

29 (1)

ACCEPTED

X

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography  
☐ 4. Sculpture ☐ 5. Crafts

Materials

Ink wash + charcoal

Title

Evening

Shp 5 dr

Price or NFS

NFS

Insurance Value  
If NFS Only

5150

Size

15" x 17 1/2"

## GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.  
For Sale

Total No. in Edition

Price  
Unframed

Price of  
Frame

ACCEPTED

X

DO NOT WRITE IN  
THIS SECTION

30 (1)

ACCEPTED

X

RECEIVED

DATE

REJECTED

REJECTED

DATE

4/17

DETACH



1984 MAY SHOW  
The Cleveland Museum of Art  
Cleveland, Ohio 44106



Anne Celeste Owens  
Name

1252 Giel Ave.  
Address

Lakewood, Ohio 44107  
City & State Zip

## NOTIFICATION #2

DO NOT  
DETACH**1**

- ☐ 1. Paintings    ☐ 2. Graphics    ☐ 3. Photography  
☐ 4. Sculpture    ☐ 5. Crafts

Title

AFTERNOON

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

29 (1)

X

**2**

- ☐ 1. Paintings    ☐ 2. Graphics    ☐ 3. Photography  
☐ 4. Sculpture    ☐ 5. Crafts

Title

EVENING

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

30 (1)

X

RETURN OF OBJECTS:  
REJECTED: MAY 15-19  
ACCEPTED: JULY 9-14

It is understood that the Museum will have the right to dispose  
for its own account any object not called for by the dates listed.

This is your only receipt to claim your object(s).

1984 MAY SHOW  
The Cleveland Museum of Art  
Cleveland, Ohio 44106



Anne Celeste Owens

Name

1252 Giel Ave

Address

Lakewood, Ohio 44107

City & State

Zip



NOTIFICATION #1

DO NOT  
DETACH**1**☒ 1. Paintings☐ 2. Graphics☐ 3. Photography☐ 4. Sculpture☐ 5. Crafts

Title

Afternoon

ACCEPTED

REJECTED

X

**2**☒ 1. Paintings☐ 2. Graphics☐ 3. Photography☐ 4. Sculpture☐ 5. Crafts

Title

Evening

ACCEPTED

REJECTED

X

DO NOT DETACH

DO NOT DETACH